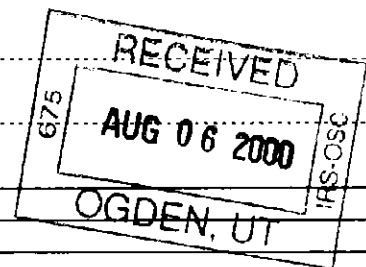


**Political Organization
Notice of Section 527 Status****Part I General Information***Applied For*
Employer identification number

1 Name of organization ELECT RUPPEL CAMPAGIN COMMITTEE	
2 Mailing address (P.O. Box or number, street, and room or suite number) 909 STATE ROAD 13 WEST	
City or town, state, and ZIP code N. MANCHESTER, IN 46962	
3 E-mail address of organization BILLRUPPEL@NMANCHESTER.NET	
4a Name of custodian of records BILL & MIRIAM RUPPEL	4b Custodian's address 909 STATE RD. 13 W N. MANCHESTER, IN 46962
5a Name of contact person BILL RUPPEL	5b Contact person's address 909 STATE RD. 13 W. N. MANCHESTER, IN 46962
6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number	
City or town, state, and ZIP code	

Part II Purpose

7 Describe the purpose of the organization
TO ELECT WILLIAM RUPPEL TO STATE LEGISLATURE

**Part III List of All Related Entities (see instructions)**

8a Name of related entity	8b Relationship	8c Address
NONE		

Part IV List of All Officers, Directors, and Highly Compensated Employees (see instructions)

[illegible]

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

**Sign
Here**

Signature of authorized official

Date _____

